.1/

## • PRINTER RUSH • (PTO ASSISTANCE)

HC Printing

,		iedvicktyad Byvod IDC FMF FDC		17/1			
From: US		DC FMF FDC		2/16/0			
	Tracking #:		Week Date:				
DOC CODE  ☐ 1449 ☐ IDS ☐ CLM ☐ IIFW ☐ SRFW ☐ DRW ☐ DRW ☐ OATH ☐ 312	DOC DATE	MISCELLA  Continuing D  Foreign Prior  Document Le  Fees  Other	Data rity				
☐ SPEC _							
[RUSH] MESSAGE: Fels: There is no fee stamp. Please charge issue fee. DA 133848  Thank you.							
[XRUSH] RESPONSE:	Correcta						

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

**REV 10/04** 

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notification	Ms	2.00x 1, 0, (	-, openi,		end much (o) maching a seq	WELL LES VEDICES 10	
	TE ADDRESS (Note: Use Block 1 for	rany change of address)		Fee(s) Transmittal.	of mailing can only be used. This certificate cannot be used ional paper, such as an assignment of mailing or transmission.	for any other accompanying	
•	UAL SCIENCE LLO	· /	OILE)	`	-		
100 BAYER ROA PITTSBURGH, PA	D	(	APR: 1 <sup>8</sup> 2005	I hereby certify the States Postal Servi addressed to the I transmitted to the U	Certificate of Mailing or Tran at this Fec(s) Transmittal is being or with sufficient postage for fit Mail Stop ISSUE FEE addres JSPTO (703) 746-4000, on the	ismission  ng deposited with the Unite irst class mail in an envelop s above, or being facsimili date indicated below.	
	•			•		.426 (Depositor's curse)	
		(A)	d.		404	(Signature)	
		`	TRADENS	Ap	ril 7, 2005	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/772,785	02/05/2004	<del></del>	Friedrich-Karl B		PO-7808C/LEA 36,299-C	5193	
TITLE OF INVENTION: P	olycarbonates, poly	YESTER CARBO	NATES AND POI	LYESTERS HAVING L	ATERAL, CYCLOALKYL-SI	JBSTITUTED PHENOLS	
APPLN. TYPE	SMALL ENTITY	ISSUE P	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$140	0	\$300	\$1700	05/09/2005	
EXAM	ONER	ART UN	ur	CLASS-SUBCLASS	7		
BOYKIN, TI	ERRESSA M	1711		528-196000			
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			No. 26,602 Preis		
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (pri	int or type)	<u> </u>		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear of T a substitute for f	on the patent. If an ass iling an assignment.	ignee is identified below, the	document has been filed for	
(A) NAME OF ASSIGNEE			B) RESIDENCE: (CITY and STATE OR COUNTRY)				
BAYER AKTIEN	GESELLSCHAFT		D 51368	LEVERKUSEN,	GERMANY		
Please check the appropriate	assignee category or categor	ries (will not be pr	inted on the patent	i): 🗖 Individual 🗗	Corporation or other private gr	roup entity Government	
4a. The following fee(s) are	enclosed:	41	. Payment of Fee(	s):		,	
S Issue Fee	•		A check in the	e amount of the fee(s) is	enclosed.		
Publication Fee (No s	mall entity discount permitte	od)		redit card. Form PTO-2			
Advance Order - # of	Copies 5		The Director Deposit Account	is hereby authorized by Number	y charge the required fec(s), or (enclose an extra	credit any overpayment, to copy of this form).	
	(from status indicated above		_		<u>.                                    </u>		
	MALL ENTITY status, See				MALL ENTITY status. See 37 C		
NOTE: The Issue Fee and Pr	is requested to apply the Issuablication Fee (if required) words of the United States Page	vill not be accepted	from anyone other	r to re-apply any previo er than the applicant; a r	usly paid issue fee to the applic egistered attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature	B	20		Date	April 7, 2005		
Typed or printed name _	Aron Preis		<del> </del>	Registrati	ion No29,426		
submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-	plication form to the USPT for reducing this burden, sh nia 22313-1450. DO NOT \$ 1450.	O. Time will vary ould be sent to the SEND FEES OR C	depending upon to chief Information COMPLETED FOR	he individual case. Any n Officer, U.S. Patent a RMS TO THIS ADDRI	by the public which is to file (an 12 minutes to complete, including comments on the amount of tind Trademark Office, U.S. Departs. SEND TO: Commissioner it displays a valid OMB control it displays a valid OMB control.	me you require to complete saturent of Commerce, P.O. for Patents, P.O. Box 1450,	
Onucr the Paperwork Reduct	TIOU ACT OF TAKE TO DETECUTE	बाद 1हर्तमाहरा १० एड	pono io a correctio	m of information unless	it displays a valid OMB contro	i muroci.	
PTO\$ =25./Pev (\$2/04). Ann	mued for use through 04/30/	2007	OMB 0651-00	113 115 Datent and 1	Frademark Office: U.S. DEPAR	TMENT OF COMMERCE	

01 FC:1501 02 FC:1504 03 FC:8001 1400.00 DA 300.00 DA 15.00 DA